

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: PARK HILLS WEST (0010918)

Address: 5910 S 118TH ST, HALES CORNERS, WI 53130

License Status: REGULAR

Licensed/Certified/Registered 12/01/2005

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0096904 **End Date:** 04/10/2006 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0095803 **End Date:** 10/27/2005 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008850 Served 11/03/2005

Deficiencies Cited
83.33(3)(b)2.b

Subject Area
MEDICATION STORED IN ORIGINAL CONTAINER

Compliance
Verified
04/10/2006

Corrected
Yes

Survey ID: 0094980 **End Date:** 06/03/2005 **Type:** INITIAL **Purpose:** SURVEY

Results: PROBATIONARY LICENSE ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Complaint History

Date Complaint Received: 01/04/2006

Date Investigation Completed: 04/10/2006

Subject Area(s)

RESIDENT RIGHTS
MEDICATIONS

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

Date Complaint Received: 08/05/2005

Date Investigation Completed: 10/27/2005

Subject Area(s)

MEDICATIONS
ADMINISTRATION
OTHER

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

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